

CHAPTER 54-02-10
RN AND LPN NURSE LICENSURE COMPACT

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54-02-10-01. Findings and declaration of purpose.

1. The party states find that:
 - a. The health and safety of the public are affected by the degree of compliance with and the effectiveness of enforcement activities related to state nurse licensure laws;
 - b. Violations of nurse licensure and other laws regulating the practice of nursing may result in injury or harm to the public;
 - c. The expanded mobility of nurses and the use of advanced communication technologies as part of our nation's healthcare delivery system require greater coordination and cooperation among states in the areas of nurse licensure and regulation;
 - d. New practice modalities and technology make compliance with individual state nurse licensure laws difficult and complex; and
 - e. The current system of duplicative licensure for nurses practicing in multiple states is cumbersome and redundant to both nurses and states.
2. The general purposes of this compact are to:
 - a. Facilitate the states' responsibility to protect the public's health and safety;

- b. Ensure and encourage the cooperation of party states in the areas of nurse licensure and regulation;
- c. Facilitate the exchange of information between party states in the areas of nurse regulation, investigation, and adverse actions;
- d. Promote compliance with the laws governing the practice of nursing in each jurisdiction; and
- e. Invest all party states with the authority to hold a nurse accountable for meeting all state practice laws in the state in which the patient is located at the time care is rendered through the mutual recognition of party state licenses.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-02. Definitions. As used in this compact:

- 1. "Adverse action" means a home or remote state action.
- 2. "Alternative program" means a voluntary, nondisciplinary monitoring program approved by a nurse licensing board.
- 3. "Board" means a party state's regulatory body responsible for issuing nurse licenses.
- 4. "Compact" means the nurse licensure compact.
- 5. "Coordinated licensure information system" means an integrated process for collecting, storing, and sharing information on nurse licensure and enforcement activities related to nurse licensure laws, which is administered by a nonprofit organization composed of and controlled by state nurse licensing boards.
- 6. "Current significant investigative information" means:
 - a. Investigative information that a licensing board, after a preliminary inquiry that includes notification and an opportunity for the nurse to respond if required by state law, has reason to believe is not groundless and, if proved true, would indicate more than a minor infraction; or
 - b. Investigative information that indicates that the nurse represents an immediate threat to public health and safety regardless of whether the nurse has been notified and had an opportunity to respond.

7. "Home state" means the party state which is the nurse's primary state of residence.
8. "Home state action" means any administrative, civil, equitable, or criminal action permitted by the home state's laws which are imposed on a nurse by the home state's licensing board or other authority, including actions against an individual's license such as revocation, suspension, probation, or any other action which affects a nurse's authorization to practice.
9. "Information system" means the coordinated licensure information system.
10. "Licensing board" means a party state's regulatory body responsible for issuing nurse licenses.
11. "Multistate licensure privilege" means current, official authority from a remote state permitting the practice of nursing as either a registered nurse or a licensed practical or vocational nurse in such party state. All party states have the authority, in accordance with existing state due process law, to take actions against the nurse's privilege such as revocation, suspension, probation, or any other action which affects a nurse's authorization to practice.
12. "Nurse" means a registered nurse or licensed practical or vocational nurse, as those terms are defined by each party's state practice laws.
13. "Party state" means any state that has adopted this compact.
14. "Primary state of residence" means the state of a person's declared fixed permanent and principal home for legal purposes or domicile.
15. "Public" means any individual or entity other than designated staff or representatives of party state boards or the national council of state boards of nursing, incorporated.
16. "Remote state" means a party state, other than the home state:
 - a. Where the patient is located at the time nursing care is provided; or
 - b. In the case of the practice of nursing not involving a patient, in such party state where the recipient of nursing practice is located.
17. "Remote state action" means:
 - a. Any administrative, civil, equitable, or criminal action permitted by a remote state's laws which are imposed on a nurse by the remote state's licensing board or other authority, including actions

against an individual's multistate licensure privilege to practice in the remote state; and

- b. Cease and desist and other injunctive or equitable orders issued by remote states or the licensing boards thereof.
- 18. "Single state license" means a license issued by a state board of nursing that authorizes practice only in the state of issuance.
- 19. "State" means a state, territory, or possession of the United States, the District of Columbia, or the Commonwealth of Puerto Rico.
- 20. "State practice laws" means those individual party's state laws and regulations that govern the practice of nursing, define the scope of nursing practice, and create the methods and grounds for imposing discipline. "State practice laws" does not include the initial qualifications for licensure or requirements necessary to obtain and retain a license, except for qualifications or requirements of the home state.

History: Effective May 1, 2003; amended effective July 1, 2008.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-02.1. Issuance of a license by a compact party state. For purposes of this compact as of July 1, 2005, an applicant for initial licensure will not be issued a compact license granting a multistate privilege to practice unless the applicant first obtains a passing score on the applicable NCLEX® examination or predecessor examination used for licensure.

- 1. A nurse applying for a license in a home party state shall produce evidence of the nurse's primary state of residence. Such evidence shall include a declaration signed by the licensee. Further evidence that may be requested may include:
 - a. Driver's license with a home address;
 - b. Federal income tax return declaring the primary state of residence;
 - c. Military form number 2058 - state of legal residence certificate; or
 - d. W2 form from United States government or any bureau, division, or agency thereof indicating the declared state of residence.
- 2. A nurse on a visa from another country applying for licensure in a party state may declare either the country of origin or the party state as the primary state of residence. If the foreign country is declared the primary state of residence, a single state license will be issued by the party state.

3. A license issued by a party state is valid for practice in all other party states unless clearly designated as valid only in the state that issued the license.
4. When a party state issues a license authorizing practice only in that state and not authorizing practice in other party states, e.g., a single state license, the license shall be clearly marked with words indicating that it is valid only in the state of issuance.
5. A nurse changing primary state of residence, from one party state to another party state, may continue to practice under the former home state license and multistate licensure privilege during the processing of the nurse's licensure application in the new home state for a period not to exceed thirty calendar days.
6. The licensure application in the new home state of a nurse under pending investigation by the former home state shall be held in abeyance and the thirty-day period shall be stayed until resolution of the pending investigation.
7. The former home state license shall no longer be valid upon the issuance of a new home state license.
8. If a decision is made by the new home state denying licensure, the new home state shall notify the former home state within ten business days and the former home state may take action in accordance with that state's laws and rules.

History: Effective August 1, 2005; amended effective July 1, 2008.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-02.2. Limitations on multistate licensure privilege. A home state board shall include in all licensure disciplinary orders or agreements that limit practice or require monitoring the requirement that the licensee subject to said order or agreement will agree to limit the licensee's practice to the home state during the pendency of the disciplinary order or agreement. This requirement may, in the alternative, allow the nurse to practice in other party states with prior written authorization from the boards of both the home state and the other party state.

1. An individual who has a license or privilege to practice which is or was surrendered, revoked, suspended, or denied may be issued a single state license in the current primary state of residence until such time as the individual would be eligible for reinstatement in the prior state or states of adverse action.

2. Once eligible for licensure in the prior states, a multistate license may be issued.

History: Effective July 1, 2008.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-03. General provisions and jurisdiction.

1. A license to practice registered nursing issued by a home state to a resident in that state will be recognized by each party state as authorizing a multistate licensure privilege to practice as a registered nurse in such party state. A license to practice licensed practical or vocational nursing issued by a home state to a resident in that state will be recognized by each party state as authorizing a multistate licensure privilege to practice as a licensed practical or vocational nurse in such party state. In order to obtain or retain a license, an applicant must meet the home state's qualifications for licensure and license renewal as well as all other applicable state laws.
2. Party states may, in accordance with state due process laws, limit or revoke the multistate licensure privilege of any nurse to practice in their state and may take any other actions under their applicable state laws necessary to protect the health and safety of their citizens. If a party state takes such action, it shall promptly notify the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the home state of any such actions by remote states.
3. Every nurse practicing in a party state must comply with the state practice laws of the state in which the patient is located at the time care is rendered. In addition, the practice of nursing is not limited to patient care, but shall include all nursing practice as defined by the state practice laws of a party state. The practice of nursing will subject a nurse to the jurisdiction of the nurse licensing board and the courts, as well as the laws, in that party state.
4. This compact does not affect additional requirements imposed by states for advanced practice registered nursing. However, a multistate licensure privilege to practice registered nursing granted by a party state shall be recognized by other party states as a license to practice registered nursing if one is required by state law as a precondition for qualifying for advanced practice registered nurse authorization.
5. Individuals not residing in a party state shall continue to be able to apply for nurse licensure as provided for under the laws of each party state. However, the license granted to these individuals will not be recognized

as granting the privilege to practice nursing in any other party state unless explicitly agreed to by that party state.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-04. Applications for licensure in party state.

1. Upon application for a license, the licensing board in a party state shall ascertain, through the coordinated licensure information system, whether the applicant has ever held, or is the holder of, a license issued by any other state, whether there are any restrictions on the multistate licensure privilege, and whether any other adverse action by any state has been taken against the license.
2. A nurse in a party state shall hold licensure in only one party state at a time, issued by the home state.
3. A nurse who intends to change primary state of residence may apply for licensure in the new home state in advance of such change. However, new licenses will not be issued by a party state until after a nurse provides evidence of change in primary state of residence satisfactory to the new home state's licensing board.
4. When a nurse changes primary state of residence by:
 - a. Moving between two party states, and obtains a license from the new home state, the license from the former home state is no longer valid;
 - b. Moving from a nonparty state to a party state, and obtains a license from the new home state, the individual state license issued by the nonparty state is not affected and will remain in full force if so provided by the laws of the nonparty state; and
 - c. Moving from a party state to a nonparty state, the license issued by the prior home state converts to an individual state license, valid only in the former home state, without the multistate licensure privilege to practice in other party states.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-05. Adverse actions. In addition to the general provisions described in section 54-02-10-03, the following provisions apply:

1. The licensing board of a remote state shall promptly report to the administrator of the coordinated licensure information system any remote state actions, including the factual and legal basis for such action, if known. The licensing board of a remote state shall also promptly report any significant current investigative information yet to result in a remote state action. The administrator of the coordinated licensure information system shall promptly notify the home state of any such reports.
2. The licensing board of a party state shall have the authority to complete any pending investigations for a nurse who changes primary state of residence during the course of such investigations. It shall also have the authority to take appropriate actions and shall promptly report the conclusions of such investigations to the administrator of the coordinated licensure information system. The administrator of the coordinated licensure information system shall promptly notify the new home state of any such actions.
3. A remote state may take adverse action affecting the multistate licensure privilege to practice within that party state. However, only the home state shall have the power to impose adverse action against the license issued by the home state.
4. For purposes of imposing adverse action, the licensing board of the home state shall give the same priority and effect to reported conduct received from a remote state as it would if such conduct had occurred within the home state. In so doing, it shall apply its own state laws to determine appropriate action.
5. The home state may take adverse action based on the factual findings of the remote state, so long as each state follows its own procedures for imposing such adverse action.
6. Nothing in this compact shall override a party state's decision that participation in an alternative program may be used in lieu of licensure action and that such participation shall remain nonpublic if required by the party state's laws. Party states must require nurses who enter any alternative programs to agree not to practice in any other party state during the term of the alternative program without prior authorization from such other party state.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-06. Additional authorities invested in party state nurse licensing boards. Notwithstanding any other powers, party state nurse licensing boards shall have the authority to:

1. If otherwise permitted by state law, recover from the affected nurse the costs of investigations and disposition of cases resulting from any adverse action taken against that nurse;
2. Issue subpoenas for both hearings and investigations which require the attendance and testimony of witnesses and the production of evidence. Subpoenas issued by a nurse licensing board in a party state for the attendance and testimony of witnesses, or the production of evidence, or both, from another party state, shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage, and other fees required by the service statutes of the state where the witnesses or evidence, or both, are located;
3. Issue cease and desist orders to limit or revoke a nurse's authority to practice in their state; and
4. Promulgate uniform rules and regulations as provided for in subsection 3 of section 54-02-10-08.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-07. Coordinated licensure information system.

1. All party states shall participate in a cooperative effort to create a coordinated data base of all licensed registered nurses and licensed practical or vocational nurses. This system will include information on the licensure and disciplinary history of each nurse, as contributed by party states, to assist in the coordination of nurse licensure and enforcement efforts.
2. Notwithstanding any other provision of law, all party states' licensing boards shall promptly report adverse actions, actions against multistate licensure privileges, any current significant investigative information yet to result in adverse action, denials of applications, and the reasons for such denials, to the coordinated licensure information system.
3. Current significant investigative information shall be transmitted through the coordinated licensure information system only to party state licensing boards.
4. Notwithstanding any other provision of law, all party states' licensing boards contributing information to the coordinated licensure information system may designate information that may not be shared with nonparty

states or disclosed to other entities or individuals without the express permission of the contributing state.

5. Any personally identifiable information obtained by a party states' licensing board from the coordinated licensure information system may not be shared with nonparty states or disclosed to other entities or individuals, except to the extent permitted by the laws of the party state contributing the information.
6. Any information contributed to the coordinated licensure information system that is subsequently required to be expunged by the laws of the party state contributing that information shall also be expunged from the coordinated licensure information system.
7. The compact administrators, acting jointly with each other and in consultation with the administrator of the coordinated licensure information system, shall formulate necessary and proper procedures for the identification, collection, and exchange of information under this compact.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-07.1. Information system - Levels of access.

1. The public shall have access to nurse licensure information in accordance with North Dakota Century Code Chapter 44-04, including:
 - a. The nurse's name;
 - b. Jurisdictions of licensure;
 - c. License expiration dates;
 - d. Licensure classification and status;
 - e. Public emergency and final disciplinary actions, as defined by contributing state authority; and
 - f. The status of multistate licensure privileges.
2. Nonparty state boards shall have access to all information system data except current significant investigative information and other information as limited by contributing party state authority.
3. Party state boards shall have access to all information system data contributed by the party states and other information as limited by contributing nonparty state authority.

4. The licensee may request in writing to the home state board to review the data relating to the licensee in the information system. In the event a licensee asserts that any data relating to that licensee is inaccurate, the burden of proof shall be upon the licensee to provide evidence that substantiates such claim. The board shall verify and within ten business days correct inaccurate data to the information system.
5. The board shall report to the information system within ten business days:
 - a. Disciplinary action, agreement, or order requiring participation in alternative programs or which limit practice or require monitoring, except agreements and orders relating to participation in alternative programs required to remain nonpublic by contributing state authority;
 - b. Dismissal of complaint; and
 - c. Changes in status of disciplinary action or licensure encumbrance.
6. Current significant investigative information shall be deleted from the information system within ten business days upon report of disciplinary action, agreement, or order requiring participation in alternative programs or agreements which limit practice or require monitoring or dismissal of a complaint.
7. Changes to licensure information in the information system shall be completed within ten business days upon notification by a board.

History: Effective July 1, 2008.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51, 44-04

54-02-10-08. Compact administration and interchange of information.

1. The head of the nurse licensing board, or that person's designee, of each party state shall be the administrator of this compact for that state.
2. The compact administrator of each party state shall furnish to the compact administrator of each other party state any information and documents, including a uniform data set of investigations, identifying information, licensure data, and disclosable alternative program participation information to facilitate the administration of this compact.
3. Compact administrators shall have the authority to develop uniform rules to facilitate and coordinate implementation of this compact. These

uniform rules shall be adopted by party states, under the authority invested under subsection 4 of section 54-02-10-06.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-09. Immunity. No party state or the officers or employees or agents of a party state's nurse licensing board who acts in accordance with the provisions of this compact shall be liable on account of any act or omission in good faith while engaged in the performance of duties under this compact. Good faith in this article shall not include willful misconduct, gross negligence, or recklessness.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-10. Implementation, withdrawal, and amendment.

1. This compact shall enter into force and become effective as to any state when it has been enacted into the laws of that state. Any party state may withdraw from this compact by enacting a statute or administrative rules, repealing the same, but no such withdrawal shall take effect until six months after the withdrawing state has given notice of the withdrawal to the executive heads of all other party states.
2. No withdrawal shall affect the validity or applicability by the licensing boards of states remaining party to the compact of any report of adverse action occurring prior to the withdrawal.
3. Nothing contained in this compact shall be construed to invalidate or prevent any nurse licensure agreement or other cooperative arrangement between a party state and a nonparty state that is made in accordance with the other provisions of this compact.
4. This compact may be amended by the party states. No amendment to this compact shall become effective and binding upon the party states unless and until it is enacted into the laws or administrative rules of all party states.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-11. Construction and severability.

1. This compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this compact shall be severable and if any phrase, clause, sentence, or provision of this compact is

declared to be contrary to the constitution of any party state or of the United States or the applicability thereof to any government, agency, person, or circumstance is held invalid, the validity of the remainder of this compact and the applicability thereof to any government, agency, person, or circumstance shall not be affected thereby. If this compact shall be held contrary to the constitution of any state party thereto, the compact shall remain in full force and effect as to the remaining party states and in full force and effect as to the party state affected as to all severable matters.

2. In the event party states find a need for settling disputes arising under this compact:
 - a. The party states may submit the issues in dispute to an arbitration panel which will be comprised of an individual appointed by the compact administrator in the home state; an individual appointed by the compact administrator in the remote states involved; and an individual mutually agreed upon by the compact administrators of all the party states involved in the dispute.
 - b. The decision of a majority of the arbitrators shall be final and binding.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51

54-02-10-12. Other compact requirements - Compact administration.

1. "Head of the nurse licensing board" as used to define the compact administrator in section 54-02-10-08 means the North Dakota board of nursing.
2. Upon the effective date of this compact, the licensing board of North Dakota will participate with other licensing boards in a compact evaluation initiative, designed to evaluate the effectiveness and operability of this compact. Such compact evaluation initiative will be conducted by the nurse licensure compact administrators. A component of the compact evaluation initiative shall include a remote state identification system through which nurses will designate those remote states in which the nurse is practicing. A nurse's practice information in such identification system will be updated upon issuance and renewal of the nurse's license. The compact evaluation initiative shall continue until the year 2008, after which time a report shall be produced for comment by the participating licensing boards and will be submitted to the North Dakota legislative assembly in the form of a nurse licensure compact evaluation report.

3. To facilitate cross-state enforcement efforts, North Dakota law provides the power to recover from the affected nurse, as authorized by North Dakota Century Code section 43-12.1-13, the assessment of costs or disbursements, or both, resulting from adverse actions taken by this state against that nurse.
4. This compact is designed to facilitate the regulation of nurses and does not relieve employers from complying with statutorily imposed obligations.
5. This compact does not supersede existing state labor laws.
6. This compact does not take effect before July 1, 2003.

History: Effective May 1, 2003.

General Authority: NDCC 43-12.1-08

Law Implemented: NDCC 43-51